•								plication or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								1X1F5T14-00016					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			_					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		-	SIC FEE			BASIC FEE		
TOTAL CHARGEABLE CLAIMS			⊋-ഗ minus 20=		• 70			/ ¢ 0		1	***		
INDEPENDENT CLAIMS			7 minus 3 =		• 8		· -	(\$ 9=		OR	X\$18=		
MULTIPLE DEPENDENT CLAIM P								X40=		OR	X80≃		
							+	135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							ī	OTAL	355 4	OR	TOTAL		
CLAIMS AS AMENDED - PART II										_	OTHER		
		(Column 1) CLAIMS		(Colui		(Column 3)	S	MALL	ENTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	\	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	•	=		<40=	-	OR	X80=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-						
							L	135=		OR	+270=		
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
·		(Column 1) CLAIMS	· · · ·	(Colu	mn 2) IEST	(Column 3)	ı						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	IBER	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	- ×	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= -		40 =		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			.070		
								135= TOTAL		OR	+270= TOTAL		
								IT. FEE		OR	ADDIT. FEE		
	·	(Column 1) CLAIMS	: -	(Colui	mn 2) IEST	(Column 3) I	1 —						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [×	(\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		(40=			X80=		
٩	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN'	T CLAIM		」 ├─			OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
** If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		imber Previously Pa nber Previously Pa					er found	in the app	oropriate box	(in co	lumn 1.		